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Date: <u>December 14, 2001</u> Docket No.: 0933-0179P

Assistant Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sir:

As authorized by the inventor(s), transmitted herewith for filing is a patent application applied for on behalf of the inventor(s) according to the provisions of 37 CFR 1.41(c).

Inventor(s): SALONEN, Jukka T.

For: METHOD FOR ASSESSING THE RISK OF CARDIOVASCULAR DISEASE

Enclosed are:

\sqrt{X}	A specification consisting of 20 pages
	sheet(s) of drawings
	Certified copy of Priority Document(s)
<u>X</u>	Executed Declaration in accordance with 37 CFR 1.64 will follow
	Applicant claims small entity status in accordance with 37 CFR 1.27
√_x_	Preliminary Amendment

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\sqrt{X}	Information Sheet
	Information Disclosure Statement, PTO-1449 with reference(s)
	Application Data Sheet in accordance with 37 CFR 1.76
	Other
	Applicant requests early publication

The filing fee has been calculated as shown below:

			LARGE	ENTITY		SMALL	ENTITY
FOR	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE
BASIC FEE	******** ***********	*****	****	\$740.00	or	****	\$370.00
TOTAL CLAIMS	29 - 20 =	9	x18 =\$	162.00	or	x 9 =	\$ 0.00
INDEPENDENT	3 - 3 =	0	x84 =\$	0.00	or	x 42 =	\$ 0.00
MULTIPLE DE	+280 =	\$280.00	or	+140 =	\$ 0.00		
,		ŗ	rotal \$:	1,182.00	•	TOTAL	\$ 0.00

X The application transmitted herewith is filed in accordance with 37 CFR 1.41(c). The undersigned has been authorized by the inventor(s) to file the present application. The original duly executed patent application together with the surcharge will be forwarded in due course.

X A check in the amount of \$1,182.00 to cover the filing fee and recording fee (if applicable) is enclosed.

____ The Government Filing Fee will be paid at the time of completion of the filing requirement.

Please charge Deposit Account No. 02-2448 in the amount of \$____. A triplicate copy of this transmittal form is enclosed.

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 2292 P. O. Box 747 Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000

No fee is enclosed.

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. 1.16 or under 37 C.F.R. 1.17; particularly, extension of time fees.

Respectfully submitted,

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